



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application of:

Simon, Thor L.

Application No.:

10/604,863

Filing Date:

August 22, 2003

Confirmation No.:

1862

Title:

Signaling System For Telecommunications

INFORMATION DISCLOSURE STATEMENT

Commissioner for Patents P O Box 1450 Alexandria, VA 22313-1450

Applicant requests that the reference cited on the attached substitute form 1449 be included in the record of the above-referenced patent application. A copy of the reference is provided herewith.

No fee is believed to be due with this paper as three months have not passed since filing and we have not received an action on the merits. However, if necessary, the Commissioner is authorized to debit any additional fees deemed due from Deposit Account No. 15-0610.

Respectfully submitted, OPPEDAHL & LARSON, LLP

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Certificate of Mailing under 37 CFR 1.8

I hereby certify that this paper and the attachments named herein are being deposited with the United States Postal Service as First Class Mail in an envelope addressed to Commissioner for Patents, P O Box 1450, Alexandria, VA 22313-1450 on September 3, 2003 by Mary Winston.

September 3, 2003

Date of Signature

Signature



ATTORNEY DOCKET NO. TLSI.P-001-2

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

INFORMATION DISCLOSURE STATEMENT BY APPLICANT

Application No: 10/604,863

Filing Date: August 22, 2003

First Named Inventor: Simon, Thor L. Confirmation No.: 1862

Group Art Unit: Examiner Name:

Attorney Docket No.: TLSI.P-001-2

FOREIGN PATENT DOCUMENTS

Examiner's Initials	office	Number	Kind Code	Name of Patentee or Applicant of Cited Document	Date of Publication of Cited Document	Pages where relevant passages appear	T ⁶
	wo	00/33519		Simon, Thor	8 June 2000		

	This Information Disclosure Citation List is being submitted as a substitute for Form PTO-
1449.	The Examiner is requested to place his or her initials on the lines adjacent to the citations to
indicat	e that the reference has been considered. The Examiner is further requested to fill in his or her
name a	and the date the information was considered in blocks at the bottom of this substitute for Form
PTO-1	449.

Examiner:	Date Considered: